

2012 Summer Day Camp  
Camper Info Sheet  
(Please fill out a sheet for each child)

Name: \_\_\_\_\_ Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Phone: \_\_\_\_\_

Secondary Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Please list any accommodations that we may need to make for your child to enjoy camp to the fullest

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What is your child's swimming ability? (Please check one)

- ☐ Beginner – Unfamiliar with the water. Will need careful supervision in the pool.
- ☐ Intermediate – Comfortable in shallow water. May need assistance in deeper water.
- ☐ Advanced – Comfortable in shallow or deep water.

Please use the entries below to identify any persons who may or may not be granted permission by you to pick up your child(ren) from Camp.

This person IS / IS NOT allowed to pick up my child(ren).

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

This person IS / IS NOT allowed to pick up my child(ren).

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

This person IS / IS NOT allowed to pick up my child(ren).

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_  
Guardian Signature

\_\_\_\_\_  
Date